

Hunter v. Durr

06 - CV - 00411

Exhibit F

**to Plaintiff's Suggestions in Opposition
to Defendant's Motion for Summary Judgment**

Durr's Supervisor's Incident Report

Supervisor's Incident Investigation Report

Report Status

Preliminary ☐Final ☐

General Information	Type(s) of Incident
Incident Date: <u>JANUARY 27, 2005</u> Time: _____	Injury: <input type="checkbox"/> Fatality <input type="checkbox"/>
Area / Column Location: _____	Lost time <input checked="" type="checkbox"/>
Employee Name: <u>MS. ANNE MARIE HUNTER</u>	Medical Aid <input type="checkbox"/>
Employee SSN: <u>509-66-4273</u> DOB: <u>11-30-59</u>	First Aid <input type="checkbox"/>
Job Class: Journeyman Appr. A B C - N/A	Near Miss <input type="checkbox"/>
Foreman: <u>- N/A</u>	Type of Damage <input type="checkbox"/> Cost of Damage _____
Department: <u>N/A</u>	Fire <input type="checkbox"/>
Witness: <u>CHRISTIAN RATHSACK, Durr Apt</u>	Property <input type="checkbox"/>
Where was treatment given: Concentra or (other) <u>BAPTIST HEALTH ER</u>	Equipment <input type="checkbox"/>
Job # and product employee was working on: <u>PHOTOGRAPHING BC</u>	Business <input type="checkbox"/>
When did employee return to work: <u>STILL OFF WORK</u>	Security <input type="checkbox"/>
Number of days missed: <u>TARGET RTW 6/1/05</u>	Near Miss <input type="checkbox"/>
	Spills <input type="checkbox"/>

Events leading up to and description of incident (include description of damage & losses)

(What, Where, Why, Who, How)

SEE ATTACHED

Cause Analysis, Direct & Underlying

Unsafe Practices:

WORKING OR ALLOWED TO WORK IN AREA WITH MISSING GRATING

Unsafe Conditions:

EXPOSURE TO A FALL HAZARD AND/OR TRIP HAZARD TO OTHER ELEVATION

Contributing Factors:

FAILURE TO INSPECT AREA OR HAVE AREA INSPECTED TO ASSURE FREE OF FLOOR OBSTACLES

Evaluation of Risk

Loss Severity Potential:

Major: ☒Serious: ☐Minor: ☐

Probable Recurrence:

Frequent: ☐Occasional: ☐Rare: ☒

Supervisor's Incident Investigation Report

Preventive Action

Interim: What interim action has / will be taken to prevent recurrence?

- * ALL VISITORS / VENDORS TO SITE WILL BE ESCORTED AND NOT LEFT UNATTENDED.
- * WHEN ENTERING A HAZARDOUS AREA, EVALUATE AREA FOR HAZARD. CONDUCT A SAFETY TASK ANALYSIS

Final: What final corrective action has / will be taken to prevent recurrence?

- * ALL VISITORS / VENDORS ON SITE TO BE ESCORTED AND ^{NOT} BE LEFT UNATTENDED
- * SAFETY TASK ANALYSIS TO BE COMPLETED AND REVIEWED WITH ALL PERSONNEL (EMPLOYEES, VISITORS, VENDORS) WHEN A HAZARDOUS AREA IS TO BE ACCESSED

Responsible party for follow-up: _____ Expected completion date: _____

Follow-up verified by: _____ Actual completion date: _____

Injury Information

Describe the nature of the injury, treatment, medications, follow-up-care, etc.

CONTUSIONS TO RIGHT SIDE OF HER BODY. FURTHER MEDICAL EVALUATION IDENTIFIED FRACTURE TO RIGHT WRIST

Management Control

What management work is possible to prevent losses of this type?

- * PROPER ESCORTING OF PERSONNEL
- * IMMEDIATE CORRECTIVE ACTION OF MATERIAL NOT PROPERLY FITTING

Report Validation & Evaluation

Will a comprehensive report follow? (yes or no)

Investigating Supervisor

Signature

Date

Safety Reviewed

Signature

Date